



**Arizona Department of Agriculture (ADA)**  
Licensing and Registration Section  
1688 West Adams, Phoenix, Arizona 85007  
Phone: (602) 542-0965  
Fax (602) 542-0466

AUG 29 2011

**For ADA/ESD Use Only**

Co. License # 30  
Check # 2688  
Check Date 8-25-11  
Check Amount 75.00  
196830

**Registry of Equine Rescue Facilities Application**

Facility Name Wildhorse Ranch Rescue  
Mailing Address PO Box 415  
City Gilbert State AZ Zip Code 85299  
Physical Address (if different from above) 11811 S Lindsay Road  
City Gilbert State AZ Zip Code 85296  
Telephone Number 480-503-5497 Fax Number \_\_\_\_\_  
Contact Person Name Kim Meagher Phone Number 480-503-5497  
Email Address kimberly@whrr.org

**Documents required to accompany this application:**

- Letter from a licensed veterinarian dated within fifteen days of this filing, certifying that the facility is not inadequate with respect to any of the Arizona Equine Rescue Standards and attach a signed copy of the completed Arizona Equine Rescue Standards veterinary checklist. These standards can be obtained from [http://www.aaep.org/pdfs/rescue\\_retirement\\_guidelines.pdf](http://www.aaep.org/pdfs/rescue_retirement_guidelines.pdf)
- Documents demonstrating current non-profit corporation status as filed with the Arizona Corporation Commission. These documents can be obtained from the Corporation Commission through a records request for a Certificate of Good Standing at <http://www.azcc.gov/divisions/corporations/certgoodstanding.asp>.

**Check ONLY one box below**

- ☒ Check this box only if documents filed with this registration will be posted to the ADA Web Site
- ☐ Check this box and provide a link to these documents on another rescue site. \_\_\_\_\_

**A \$75.00 annual registration fee must also accompany this application.**

Return this application along with your fee to the address above. Please make check or money orders payable to the Arizona Department of Agriculture-ESD. Our goal is to process the application as timely as possible, normally this takes less than 14 days. Please do not send cash! Incomplete applications or applications with incorrect funds will be returned.

I hereby apply to have the facility named above listed on the Equine Rescue Facility Registry, pursuant to A.R.S. § 3-1350 and A.A.C. R3-2-708. By my signature below, I agree to conduct business according to the Arizona Equine Rescue Standards. The information contained in this application is true and accurate. I understand providing false information in the State of Arizona is a felony.

By (Print or type) Kimberly Meagher

Title Founder and Chair - Wildhorse Ranch Rescue Date ~~3/17/2011~~ 8/25/2011

Signature 

GAYLE S. LEITH, D.V.M.; M.S.  
*Diplomate of the American  
Board of Veterinary Practitioners  
Certified in Equine Practice*

EDWARD D. VOSS, D.V.M.  
*Diplomate of the American College  
of Veterinary Internal Medicine*



**MEDICAL & SURGICAL CENTRE**

D. SCOTT TAYLOR, D.V.M.  
*Diplomate of the American  
College of Veterinary Surgeons*  
RICK D. HOWARD, D.V.M., PHD.  
*Diplomate of the American  
College of Veterinary Surgeons*  
TRESHA ROBINSON, D.V.M.

August 25, 2011

To whom it may concern:

Wildhorse Ranch Rescue operated by Kim Meagher has made some very positive changes within their facility over the past several months. They are working hard to raise the standards of what an equine rescue facility should provide. Our practice has been working with them for years. They seek our advice for medical decisions.

Sincerely,

A handwritten signature in black ink that reads "Tresha Robinson, DVM". The signature is written in a cursive, flowing style.

Tresha Robinson, DVM



SEP 16 2011

**Veterinary Checklist for Rescue/Retirement Facilities**

(Adapted from the Thoroughbred Adoption and Retirement Association's (TARA)

"Vet Check for Thoroughbred Adoption & Retirement Sites.")

Note: This checklist is provided as a sample for use by a veterinarian when evaluating the facilities available at an individual rescue or retirement.

**Scoring System for Checklist:**

Excellent - 5

Good - 4

Adequate - 3

Fair - 2

Inadequate - 1

Add specific comments as needed.

Name of Facility: Wildhorse Ranch Rescue

Address: 11811 S. Lindsay Rd Gilbert AZ 85296

Primary Contact: Kim Meagher

Telephone: 480 503 5497 Fax: 480 718-8415

**I. Horses**

Number at facility: 12 Maximum capacity: 15

Overall appearance and health: 4

**II. Preventative Care and Basic Health Management**

4 Parasite Control Program de-worming as needed / oral  
+ Sometimes daily pellets

09/30/2011

Arizona Corporation Commission  
State of Arizona Public Access System

10:29 AM

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Dissolution](#)[Microfilm](#)[E-FILE An Annual Report Online << Click Here](#)[FORMS For Annual Reports To Be Printed And Mailed << Click Here](#)**Corporate Inquiry**

File Number: -1047167-0

[Check Corporate Status](#)

Corp. Name: WILDHORSE RANCH RESCUE, INC.

**Domestic Address**

PO BOX 415

GILBERT, AZ 85299

**Statutory Agent Information**

Agent Name: KIMBERLY MEAGHER

**Agent Mailing Address:**

PO BOX 415

GILBERT, AZ 85299

**Agent Physical Address:**

11811 S LINDSAY RD

GILBERT, AZ 85296

Agent Status: APPOINTED 09/27/2002

Agent Last Updated: 06/13/2007

**Additional Corporate Information**

Corporation Type: NON-PROFIT

Business Type: CHARITABLE

Incorporation Date: 09/27/2002

Corporate Life Period: PERPETUAL

Domicile: ARIZONA

County: MARICOPA

Approval Date: 09/27/2002

Original Publish Date: 10/28/2002